# BEFORE THE DIVISION OF MEDICAL QUALITY MEDICAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

In the Matter of the Accusation Against:	)
PETER J. CHESKI, M.D.	) File No. 11-2000-111130
Physician's and Surgeon's	)
Certificate No. A 63634	)
Respondent.	)
	<b>→</b>

#### **DECISION**

The attached Stipulated Settlement and Disciplinary Order is hereby adopted as the Decision and Order of the Division of Medical Quality of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall bec	ome effecti	ve a	at 5:00 p.m	. on _	March	10,	2003	
			_					
IT IS SO ORDERED _	February	7,	2003	_•				

MEDICAL BOARD OF CALIFORNIA

Lorie G. Rice, Chair

Panel A

**Division of Medical Quality** 

- 11		· ·				
1	BILL LOCKYER, Attorney General					
2	of the State of California RAJPAL S. DHILLON, State Bar No. 190583					
3	Deputy Attorney General California Department of Justice					
4	300 So. Spring Street, Suite 1702 Los Angeles, CA 90013					
5	Telephone: (213) 897-2568 Facsimile: (213) 897-1071					
6	Attorneys for Complainant					
7	BEFORE T					
8	DIVISION OF MEDICAL QUALITY MEDICAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA					
	STATE OF CAL	II ORUA				
10	In the Matter of the Accusation Against:	Case No. 11-2000-111130				
11	Peter J. Cheski, M.D.	OAH No. L-2001070122				
12 13	9700 Venice Blvd. Culver City, California 90232	STIPULATED SETTLEMENT AND DISCIPLINARY ORDER				
14	Physician's and Surgeon's Certificate No. A 63634	DISCIPLINARY ORDER				
15	Respondent.					
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18	IT IS HEREBY STIPULATED AND	AGREED by and between the parties to the				
19	above-entitled proceedings that the following matter	rs are true:				
20	<u>PARTIES</u>					
21	1. Ron Joseph (Complainant) is the Executive Director of the Medical Board					
22	of California. He brought this action solely in his official capacity and is represented in this					
23	matter by Bill Lockyer, Attorney General of the State of California, by Rajpal S. Dhillon, Deputy					
24	Attorney General.					
25	2. Peter J. Cheski, M.D. (Respo	ndent) is represented in this proceeding by				
26	attorney Harmon B. Levine, whose address is TUVERSON & HILLYARD, 12121 Wilshire					
27	Boulevard, Suite 1100, Los Angeles, California 90025-1032.					
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3. On or about October 10, 1997, the Medical Board of California issued Physician's and Surgeon's Certificate No. A 63634 to Peter J. Cheski, M.D.

#### JURISDICTION

4. Accusation No. 11-2000-111130 was filed before the Division of Medical Quality (Division), Medical Board of California, Department of Consumer Affairs, and is currently pending against Respondent. The Accusation and all other statutorily required documents were properly served on Respondent on May 17, 2001. Respondent timely filed his Notice of Defense contesting the Accusation. A copy of Accusation No. 11-2000-111130 is attached as exhibit A and incorporated herein by reference.

#### ADVISEMENT AND WAIVERS

- 5. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in Accusation No. 11-2000-111130. Respondent has also carefully read, fully discussed with counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.
- 6. Respondent is fully aware of his legal rights in this matter, including the right to a hearing on the charges and allegations in the Accusation; the right to be represented by counsel at his own expense; the right to confront and cross-examine the witnesses against him; the right to present evidence and to testify on his own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.
- 7. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

#### CULPABILITY

8. Respondent understands and agrees that the charges and allegations in Accusation No. 11-2000-111130, if proven at a hearing, constitute cause for imposing discipline upon his Physician's and Surgeon's Certificate.

9. For the purpose of resolving the Accusation without the expense and uncertainty of further proceedings, Respondent agrees that, at a hearing, Complainant could establish a prima facie case as to certain charges in the Accusation. Without admitting any of the charges in the Accusation, Respondent gives up his right to contest those charges.

10. Respondent agrees that his Physician's and Surgeon's Certificate is subject to discipline and he agrees to be bound by the Division's imposition of discipline as set forth in the Disciplinary Order below.

#### <u>CONTINGENCY</u>

- Quality. Respondent understands and agrees that counsel for Complainant and the staff of the Medical Board of California may communicate directly with the Division regarding this stipulation and settlement, without notice to or participation by Respondent or his counsel. By signing the stipulation, Respondent understands and agrees that he may not withdraw his agreement or seek to rescind the stipulation prior to the time the Division considers and acts upon it. If the Division fails to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal action between the parties, and the Division shall not be disqualified from further action by having considered this matter.
- 12. The parties understand and agree that facsimile copies of this Stipulated Settlement and Disciplinary Order, including facsimile signatures thereto, shall have the same force and effect as the originals.
- 13. In consideration of the foregoing admissions and stipulations, the parties agree that the Division may, without further notice or formal proceeding, issue and enter the following Disciplinary Order:

#### **DISCIPLINARY ORDER**

IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. 63634 issued to Peter J. Cheski, M.D. is revoked. However, the revocation is stayed and Respondent is placed on probation for two (2) years on the following terms and conditions.

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Within 15 days after the effective date of this decision the respondent shall provide the Division, or its designee, proof of service that respondent has served a true copy of this decision on the Chief of Staff or the Chief Executive Officer at every hospital where privileges or membership are extended to respondent or at any other facility where respondent engages in the practice of medicine and on the Chief Executive Officer at every insurance carrier where malpractice insurance coverage is extended to respondent.

- EDUCATION COURSE Within the first year of the effective date of this 1. decision, respondent shall submit to the Division or its designee for its prior approval an educational program or course to be designated by the Division or its designee which shall be aimed at correcting any areas of deficient practice or knowledge which shall not be less than 40 hours and only for the second year of probation. This program shall be in addition to the Continuing Medical Education (CME) requirements for re-licensure. Following the completion of each course, the Division or its designee may administer an examination to test respondent's knowledge of the course. Respondent shall provide proof of attendance for 65 hours of continuing medical education of which 40 hours were in satisfaction of this condition and were approved in advance by the Division or its designee.
- 2. PHYSICIAN ASSESSMENT AND CLINICAL EDUCATION Within 90 days from the effective date of this decision, respondent, at his expense, PROGRAM shall enroll in the Physician Assessment and Clinical Education Program at the University of California, San Diego School of Medicine (hereinafter the "PACE Program"). The PACE Program consists of the Comprehensive Assessment Program which is comprised of two mandatory components: Phase 1 and Phase 2. Phase 1 is a two-day program which assesses physical and mental health; neuropsychological performance; basic clinical and communication skills common to all clinicians; and medical knowledge, skill and judgment pertaining to the specialty or sub-specialty of the respondent. After the results of Phase 1 are reviewed, respondent shall complete Phase 2. Phase 2 comprises five (5) days (40 hours) of Clinical Education in respondent's field of specialty. The specific curriculum of Phase 2 is designed by PACE Faculty and the Department or Division of respondent's specialty, and utilizes data

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obtained from Phase 1. After respondent has completed Phase 1 and Phase 2, the PACE Evaluation Committee will review all results and make a recommendation to the Division or its designee as to whether further education, clinical training (including scope and length), treatment of any medical and/or psychological condition and any other matters affecting respondent's practice of medicine will be required or recommended. The Division or its designee may at any time request information from PACE regarding the respondent's participation in PACE and/or information derived therefrom. The Division may order respondent to undergo additional education, medical and/or psychological treatment based upon the recommendations received from PACE.

Upon approval of the recommendation by the Division or its designee, respondent shall undertake and complete the recommended and approved PACE Program. At the completion of the PACE Program, respondent shall submit to an examination on its contents and substance. The examination shall be designed and administered by the PACE Program faculty. Respondent shall not be deemed to have successfully completed the program unless he passes the examination. Respondent agrees that the determination of the PACE Program faculty as to whether or not he passed the examination and/or successfully completed the PACE Program shall be binding.

Respondent shall complete the PACE Program no later than six months after his initial enrollment unless the Division or its designee agrees in writing to a later time for completion.

If respondent successfully completes the PACE Program, including the examination referenced above, he agrees to cause the PACE Program representative to forward a Certification of Successful Completion of the program to the Division or its designee. If respondent fails to successfully complete the PACE Program within the time limits outlined above, he shall be suspended from the practice of medicine.

Failure to participate in, and successfully complete all phases of the PACE Program, as outlined above, shall constitute a violation of probation.

3. <u>MEDICAL RECORD KEEPING COURSE</u> Within one hundred twenty (120) days of the effective date of this decision, respondent shall enroll in the PACE Program Medical Record Keeping Course and shall successfully complete the course.

Failure to participate in, and successfully complete the course, as outlined above, shall constitute a violation of probation.

- 4. <u>OBEY ALL LAWS</u> Respondent shall obey all federal, state and local laws, all rules governing the practice of medicine in California, and remain in full compliance with any court ordered criminal probation, payments and other orders.
- 5. <u>QUARTERLY REPORTS</u> Respondent shall submit quarterly declarations under penalty of perjury on forms provided by the Division, stating whether there has been compliance with all the conditions of probation.
- 6. <u>PROBATION SURVEILLANCE PROGRAM COMPLIANCE</u>
  Respondent shall comply with the Division's probation surveillance program. Respondent shall, at all times, keep the Division informed of his business and residence addresses which shall both serve as addresses of record. Changes of such addresses shall be immediately communicated in writing to the Division. Under no circumstances shall a post office box serve as an address of record, except as allowed by Business and Professions Code section 2021(b).

Respondent shall, at all times, maintain a current and renewed physician's and surgeon's license.

Respondent shall also immediately inform the Division, in writing, of any travel to any areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty (30) days.

7. <u>INTERVIEW WITH THE DIVISION, ITS DESIGNEE OR ITS</u>

<u>DESIGNATED PHYSICIAN(S)</u> Respondent shall appear in person for interviews with the Division, its designee or its designated physician(s) upon request at various intervals and with reasonable notice.

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#### 8. TOLLING FOR OUT-OF-STATE PRACTICE, RESIDENCE OR IN-

STATE NON-PRACTICE In the event respondent should leave California to reside or to practice outside the State or for any reason should respondent stop practicing medicine in California, respondent shall notify the Division or its designee in writing within ten (10) days of the dates of departure and return or the dates of non-practice within California. Non-practice is defined as any period of time exceeding thirty (30) days in which respondent is not engaging in any activities defined in Sections 2051 and 2052 of the Business and Professions Code. All time spent in an intensive training program approved by the Division or its designee shall be considered as time spent in the practice of medicine. A Board-ordered suspension of practice shall not be considered as a period of non-practice. Periods of temporary or permanent residence or practice outside California or of non-practice within California, as defined in this condition, will not apply to the reduction of the probationary order.

- 9. <u>COMPLETION OF PROBATION</u> Upon successful completion of probation, respondent's certificate shall be fully restored.
- 10. <u>VIOLATION OF PROBATION</u> If respondent violates probation in any respect, the Division, after giving respondent notice and the opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed. If an accusation or petition to revoke probation is filed against respondent during probation, the Division shall have continuing jurisdiction until the matter is final, and the period of probation shall be extended until the matter is final.
- Division the amount of \$6,000.00 within ninety (90) days of the effective date of this decision for its investigative and prosecution costs. Failure to reimburse the Division's cost of investigation and prosecution shall constitute a violation of the probation order, unless the Division agrees in writing to payment by an installment plan because of financial hardship. The filing of bankruptcy by the respondent shall not relieve the respondent of his responsibility to reimburse the Division for its investigative and prosecution costs.

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- PROBATION COSTS Respondent shall pay the costs associated with probation monitoring each and every year of probation, as designeted by the Division, which are currently set at \$2,488,00, but may be adjusted on an ennual basis. Such costs shall be payable to the Division of Medical Quality and delivered to the designated probation surveillance monitor no later than January 31 of each calendar year. Failure to pay costs within 30 days of the due date shall constitute a violation of probation.
- LICENSE SURRENDER Following the effective date of this decision, if 13. respondent ceases practicing due to retirement, health reasons or is otherwise unable to satisfy the terms and conditions of probation, respondent may voluntarily tender his certificate to the Board. The Division reserves the right to evaluate the respondent's request and to exercise its discretion whether to grant the request, or to take any other action deemed appropriate and reasonable under the circumstances. Upon formal acceptance of the tendered license, respondent will not longer be subject to the terms and conditions of probation.

#### ACCEPTANCE

I have carefully read the above Stipulated Scrilement and Disciplinary Order and have fully discussed it with my attorney, Harmon B. Levine. I understand the stipulation and the effect it will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the Decision and Order of the Division of Medical Quality, Medical Board of California.

DATED: Oct 10107

PETER J. CHESKI, M.D.

Respondent

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## Exhibit A Accusation No. 11-2000-111130

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1 2	BILL LOCKYER, Attorney General of the State of California RICHARD AVILA, State Bar No. 91214	FILED
	Deputy Attorney General	STATE OF CALIFORNIA MEDICAL BOARD OF CALIFORNIA
3	California Department of Justice 300 South Spring Street, Suite 1702	SACRAMENTO MAY 17 20 01
4	Los Angeles, California 90013 Telephone: (213) 897-6804	BY MOL ANALYST
5	Facsimile: (213) 897-1071	
6	Attorneys for Complainant	
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8	BEFORE T	
9	DIVISION OF MEDIC MEDICAL BOARD OF	
10	DEPARTMENT OF CON STATE OF CAL	
11	STATE OF CITE	
1	In the Matter of the Accusation Against:	Case No. 11-2000-111130
12	PETER J. CHESKI, M.D.	ACCUSATION
13	9700 Venice Blvd. Culver City, California 90232	
14	Physician and Surgeon's Certificate No. A 63634	
15	Respondent.	,
16		
17		•
18	Complainant alleges:	
19	PARTIE	<u>SS</u>
20	1. Ron Joseph ("Complainant")	brings this Accusation solely in his official
21	capacity as the Executive Director of the Medical Bo	oard of California, Department of Consumer
22	Affairs.	
23	2. On or about October 10, 1997	7, the Medical Board of California issued
24	Physician and Surgeon's Certificate Number A 6363	34 to PETER J. CHESKI ("Respondent").
25	The Physician and Surgeon's Certificate was in full	` <del>-</del>
26	charges brought herein and will expire on August 3	•
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#### **JURISDICTION**

- 3. This Accusation is brought before the Division of Medical Quality,
  Medical Board of California ("Division"), under the authority of the following sections of the
  Business and Professions Code ("Code").
  - 4. Section 2004 of the Code states:

"The Division of Medical Quality shall have the responsibility for the following:

- "(a) The enforcement of the disciplinary and criminal provisions of the Medical Practice Act.
  - "(b) The administration and hearing of disciplinary actions.
- "(c) Carrying out disciplinary actions appropriate to findings made by a medical quality review committee, the division, or an administrative law judge.
- "(d) Suspending, revoking, or otherwise limiting certificates after the conclusion of disciplinary actions.
- "(e) Reviewing the quality of medical practice carried out by physician and surgeon certificate holders under the jurisdiction of the board."
- 5. Section 2227 of the Code provides that a licensee who is found guilty under the Medical Practice Act may have his or her license revoked, suspended for a period not to exceed one year, placed on probation and required to pay the costs of probation monitoring, or such other action taken in relation to discipline as the Division deems proper.
  - 6. Section 2234 of the Code states:

"The Division of Medical Quality shall take action against any licensee who is charged with unprofessional conduct. In addition to other provisions of this article, unprofessional conduct includes, but is not limited to, the following:

- "(a) Violating or attempting to violate, directly or indirectly, or assisting in or abetting the violation of, or conspiring to violate, any provision of this chapter [Chapter 5, the Medical Practice Act].
  - "(b) Gross negligence.
  - "(c) Repeated negligent acts.

 part:

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- "(d) Incompetence.
- "(e) The commission of any act involving dishonesty or corruption which is substantially related to the qualifications, functions, or duties of a physician and surgeon.
- "(f) Any action or conduct which would have warranted the denial of a certificate."
- 7. Section 2266 of the Code states: "The failure of a physician and surgeon to maintain adequate and accurate records relating to the provision of services to their patients constitutes unprofessional conduct."
- 8. Section 125.3 of the Code provides, in pertinent part, that the Division may request the administrative law judge to direct a licentiate found to have committed a violation or violations of the licensing act to pay a sum not to exceed the reasonable costs of the investigation and enforcement of the case.
  - 9. Section 14124.12 of the Welfare and Institutions Code states, in pertinent
  - "(a) Upon receipt of written notice from the Medical Board of California, the Osteopathic Medical Board of California, or the Board of Dental Examiners of California, that a licensee's license has been placed on probation as a result of a disciplinary action, the department may not reimburse any Medi-Cal claim for the type of surgical service or invasive procedure that gave rise to the probation, including any dental surgery or invasive procedure, that was performed by the licensee on or after the effective date of probation and until the termination of all probationary terms and conditions or until the probationary period has ended, whichever occurs first. This section shall apply except in any case in which the relevant licensing board determines that compelling circumstances warrant the continued reimbursement during the probationary period of any Medi-Cal claim, including any claim for dental services, as so described. In such a case, the department shall continue to reimburse the licensee for all procedures, except for those invasive or surgical procedures for which the licensee was placed on probation."

#### FIRST CAUSE FOR DISCIPLINE

(Gross Negligence)

- 10. Respondent is subject to disciplinary action under section 2234, subdivision (b) of the Code, in that respondent engaged in an extreme departure from the standard of practice in the care and treatment of a plastic surgery patient. The circumstances are as follows:
  - a. On or about October 25, 1999, Patient F.P. presented to respondent for a breast augmentation consultation.
  - b. On or about October 27, 1999, F.P. presented to respondent to complete paperwork.
  - c. On or about October 28, 1999, F.P. had breast augmentation performed endoscopically via the navel. At the time, she had a history of systemic lupus erythematosis and multiple medical problems, including hypertension and lupus nephritis. Her completed paperwork listed her only current medical problems as lupus treated with steroids, hypertension treated with zestril and a mycobacterium infection of the hand treated with rifampin and ethambutol. She was taking steroids to control her lupus. She omitted to report a history of serious coronary problems dating to 1994. However, a few days prior to the surgery, her infectious disease physician had cleared her for the procedure.
  - d. The procedure lasted 1 ½ hours. About 5 to 10 minutes after extubation, F.P. began to complain of chest pain accompanied by ST-T wave changes on the cardiac monitor tracing. Fentanyl and supplemental oxygen failed to halt the problem, and she began to experience premature ventricular contractions. A cardiologist was called, but F.P. continued to deteriorate. Paramedics were then called and she was reintubated. Her heart slowed, blood pressure dropped and she did not respond to CPR. Defibrillation/cardioversion was unsuccessful. She was taken by ambulance to BMC emergency department, and upon arriving there she was without a pulse or spontaneous respirations. She remained non-responsive and died of myocardial infarction.
    - e. Respondent engaged in an extreme departure from the standard of

1. By placing a prosthetic material in a patient while there is active infection elsewhere in the body, especially if the prosthetic material is not connected with a life saving objective. A patient who is taking antibiotics 10 months after surgery to treat that same infection and is on steroids at the same time is at very high risk of infection. Such a patient is not the same as other patients taking steroids. This should be noted by the surgeon, clarified by the internist and corroborated by another physician. Breast augmentation is strongly contraindicated in such a patient.

2. By performing breast augmentation surgery at the umbilical site before it was established as a safe procedure.

#### SECOND CAUSE FOR DISCIPLINE

(Gross Negligence)

- 11. Respondent is subject to disciplinary action under section 2234, subdivision (b) of the Code, in that respondent engaged in an extreme departure from the standard of practice in the care and treatment of a plastic surgery patient. The circumstances are as follows:
- a. On or about April 14, 1999, M.F., a hemophiliac with Factor IX deficiency presented to respondent.
- b. On or about April 26, 1999, and after consulting with M.F.'s hematologist, respondent performed Alloderm augmentation of the nasolabial folds on M.F. without adverse sequelae or additional preoperative Factor IX.
- c. On or about August 6, 1999, respondent performed a facelist and neck liposuction on M.F. in an outpatient surgery center. In response to the recommendation of M.F.'s hematologist, respondent had 4000 units of Factor IX administered by I.V. to M.F. one hour prior to the surgery. Factor IX is a component of the intrinsic pathway of blood coagulation which is normally manufactured in the liver. After the receipt of the 4000 units of Factor IX, M.F.'s plasma level was only at 34%, which is dangerously low for the performance of surgery of this type. About two hours after the start of the surgery, M.F. began to bleed from a right side

#### **PRAYER**

WHEREFORE, Complainant requests that a hearing be held on the matters here	n
alleged, and that following the hearing, the Division of Medical Quality issue a decision:	

- 1. Revoking or suspending Physician and Surgeon's Certificate Number A 63634, issued to PETER J. CHESKI;
- 2. Revoking, suspending or denying approval of PETER J. CHESKI's authority to supervise physician's assistants, pursuant to section 3527 of the Code;
- 3. Ordering PETER J. CHESKI to pay the Division of Medical Quality the reasonable costs of the investigation and enforcement of this case, and, if placed on probation, the costs of probation monitoring;
  - 4. Taking such other and further action as deemed necessary and proper.

DATED: May 17, 2001

RON JOSEPH

**Executive Director** 

Medical Board of California

Department of Consumer Affairs

State of California Complainant

\*\*\*DOJ docket number\*\*\*
2Accusation.wpt 9/28/00
RA: 05/07/01